



## Department of Health

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Governor

MARY T. BASSETT, M.D., M.P.H.  
Acting Commissioner

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Acting Executive Deputy Commissioner

January 4, 2022  
DAL NH 21-30

Dear Nursing Home Administrator:

The purpose of this letter is to provide Nursing Homes with recommendations to follow during COVID-19 outbreaks, adding to the tools already available to decrease the risk of COVID-19 transmission in nursing homes. Please review with **all staff** including the direct care, clinical and medical teams to support the highest levels of health and safety for residents and staff during this time of increased outbreaks. Maintaining masking of staff and visitors and identifying COVID positive individuals are of critical importance.

Upon identification of a COVID-19 outbreak (residents and/or staff) nursing homes should implement the following:

- Immediately contact the nursing home medical director regarding the new COVID-19 outbreak who should communicate an expectation with attending physicians, nurse practitioners and physician extenders that onsite resident rounds should be conducted on a daily basis.
- Examine your 60-day PPE inventory and burn rate. Replenish all types of PPE to support ongoing health and safety for residents and staff. If PPE is stored at an offsite location, you are expected to request the necessary PPE prior to any shortage. Be specific when communicating PPE needs to include specific sizes (gloves, gowns), models (N95 masks) and types (disposable gowns), etc.
- Continue to assess the need for and strongly encourage vaccination and booster shots to all eligible residents, staff and visitors. An outbreak in a facility does not prohibit ongoing vaccination for those individuals not infected with COVID-19.
- Screen all visitors and vendors, including ombudsman and inspectors, prior to entering the nursing home. Maintain a record of this screening in the event contact tracing is needed.
- Enhance communication with residents, families, visitors and staff regarding the outbreak. Encourage both visitors and staff to stay home if sick.
- Assess each (both COVID and Non-COVID) resident's oxygen saturation using a pulse oximeter every 4 (four) hours. This will assist with the early detection of resident change in condition to allow for informed clinical and medical decisions to be made expeditiously. This is extremely important with our frail elderly who often have multiple comorbid conditions.

- Exercise vigilant deep cleaning and surface cleaning throughout the day.
- Strongly emphasize the need for visitor testing or vaccination when vaccination status is unknown.
- Increase frequency of resident and staff testing to expeditiously identify new COVID-19 cases in accordance with CMS and CDC guidance outlined in *DAL NH 21-23 Updated Nursing Home Testing Requirements* issued on October 27, 2021.
- Designate different staff members on all shifts to audit staff compliance with the appropriate donning and doffing of PPE and social distancing during breaks and meal-time.
- Monitor breakrooms and common areas to ensure appropriate social distancing.
- Conduct, at a minimum, daily team meetings to support staff and communicate strong infection prevention and control strategies.
- Maintain ongoing communication with the State and Local Health Departments on the status of the COVID-19 outbreak and contact tracing activities.
- Complete the daily Nursing Home HERDS survey by 1:00 PM daily.

In an ongoing effort to protect the health and safety of our nursing home residents, NYS will be distributing non-surgical paper masks directly to all nursing homes, with deliveries beginning on January 6 and all deliveries anticipated to arrive by January 12.

The distribution of these masks **for use by all visitors** will give each nursing home ample supply and supports our collective efforts to promote effective infection prevention and control practices. These masks should be given to all visitors in place of cloth (woven fabric) masks upon entrance to the facility. If the visitor wishes, the cloth mask may be placed over the paper mask. Remind the visitor to pinch the nose bar to enhance fit. Please be sure that **all staff** at your facility are aware that this distribution will begin arriving later this week. The purpose of these masks should be widely communicated to residents, staff, and visitors. In addition, the State has a supply of N95 masks which can be made available to nursing homes in need of this resource. Facilities in need should submit a request for N95 masks (specify make, model, size, and quantity) to their County Office of Emergency Management.

In an effort to assist nursing homes with outbreak testing, the NYSDOH will be providing Over the Counter (OTC) COVID-19 rapid antigen tests, with deliveries beginning to arrive at nursing homes later this week. The type of OTC COVID-19 rapid antigen tests being provided are the iHealth COVID-19 Antigen Rapid Test. The instructions for use (IFU) for healthcare providers can be found at: <https://www.fda.gov/media/153923/download>. Although the FDA has authorized the iHealth COVID-19 Antigen Rapid Test for self-testing at home, a facility that uses an OTC COVID-19 test on another individual needs to be registered as a limited service laboratory (LSL). As described in the [Centers for Medicare & Medicaid Services \(CMS\) frequently asked question \(FAQ\) document on OTC Home Testing](#), if an OTC test is either performed by someone other than the individual being tested (e.g., a resident of a nursing home or an employee), or the results are interpreted and reported by someone other than the

individual, then a CLIA certificate would be required. In New York State, an LSL registration is equivalent to a CLIA certificate.

If a nursing home is using an OTC COVID-19 test under their LSL, the NH is required to report all test results, including positive and negative results to ECLRS within 24 hours of obtaining the test results and on their daily HERDS survey.

As described in the intended use section of the instructions for the iHealth OTC COVID-19 Antigen Rapid Test, when testing a person who is asymptomatic, the asymptomatic person needs to be tested twice over three days with at least 24 hours (and no more than 48 hours) between tests. This is referred to as serial testing. Serial testing is not required for a symptomatic person. It is imperative that nursing homes have strong tracking systems in place to monitor the frequency of testing and results obtained especially when testing asymptomatic individuals

In the case of visitor testing, a nursing home is allowed to provide a visitor with an iHealth OTC COVID-19 Antigen Rapid Test and the visitor may test themselves. The results of self- testing for visitors will not need to be reported to either ECLRS or to HERDS.

We thank you for your ongoing commitment to protecting the health and safety of nursing home residents, staff, and visitors.

Sincerely,

A handwritten signature in cursive script that reads "Mary T. Bassett". The signature is written in black ink and is positioned above the printed name and title.

Mary T. Bassett, M.D., M.P.H.  
Acting Commissioner of Health